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Healthcare Delivery, Maternity Counselling: Exploring Pre-natal Service in University of Calabar Teaching Hospital Calabar, Cross River State

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ABSTRACT

This study explores the significance of prenatal service and maternity counseling in enhancing maternal and child health outcome. Prenatal care is a critical component of health care delivery, providing expectant mothers with essential medical care, education and support. Effective maternity counseling empowers women to make informed decision about their health pregnancy and childbirth. The university of Calabar teaching hospital (UCTH) in Calabar in Nigeria, offer comprehensive prenatal service, including maternity counseling, as part of its healthcare delivery package. University of Calabar runs specialized clinics, including a prenatal clinic, where expectant mothers receive care and counseling from experienced healthcare professionals. Prenatal services and maternity counseling are vital component of healthcare delivery, contributing to improve maternal and child health outcome. By prioritizing these services, healthcare provider can promote healthy pregnancies empower expectant mothers, and foster positive birth experiences. Informing expectant mother about pregnancy, childbirth and parenting. Identifying potentials complication and developing strategies for migration.

Keywords: Healthcare delivery, Maternity Counseling, pre-natal service, prenatal education, health promotion, risk assessment, emotional support.

Review Article

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INTRODUCTION

Healthcare delivery particularly in the realm of maturity care, is a critical aspect of ensuring the well-being of expectant mothers and their unborn children. Prenatal services and maternity counseling are essential component of comprehensive cares providing numerous benefits for maternal and childcare health outcomes (World Health Organization, 2018). Effective prenatal care can lead to improved maternal and child health outcome, reduced health care (Goldstein R.F., Abell S.K., Ranasinha S., Misso M.L., Boyle J.A., Harrison C.L., Black M.H., Li N., Hu G., Corrado F., *et al*,2018). Due to this, pregnancy is described as a unique "window of opportunity" for preventive interventions aimed at improving maternal and child health (Arabin B., Baschat A.A, 2017). Modifiable behavioral risk factors for adverse pregnancy outcomes and lifelong non-communicable diseases include a lack of physical activity, unhealthy diet, alcohol consumption, and smoking during pregnancy (Hayes L., McParlin C., Azevedo L.B., Jones D., Newham J., Olajide J., McCleman L., Heslehurst N, 2021). Even though adopting a healthy lifestyle before pregnancy is beneficial for mother and child (Hussein N., Kai J., Qureshi N, 2016) the period of pregnancy is discussed as a "teachable moment" and may, therefore, be a favorable time for interventions.

This is because pregnant women may be particularly motivated toward ensuring that they are in good health, and the importance of risk factor modification and healthy lifestyles can be reinforced effectively (Bohrer J., Ehrenthal D.B. 2015). During each counseling session, the women were asked to choose from the following topics: nutrition, water intake, physical activity, breastfeeding, alcohol, nicotine, and drug use.

Pregnancy is a crucial period and the changes happening in this phase have the potential to impact health immediately, as well as later in life (Bassey E.E. and Stella Jacks, 2019) As such, high quality care during pregnancy (antenatal care, ANC) is important for the health of the mother and the development of the unborn baby. Inadequate care during this time breaks a critical link in the continuum of care, and affects both women and babies (WHO, 2019).

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Postnatal counseling is a form of therapy designed to support parents in navigating the challenges that arise after childbirth. Whether it's coping with the physical demands of motherhood, adjusting to changes in family dynamics, or managing feelings of anxiety and depression, postnatal counselors provide a safe space for parents to express their concerns and receive guidance. The postpartum period, often referred to as the "fourth trimester," is a time of significant physical and emotional changes for new mothers. From recovering from childbirth to adjusting to the demands of breastfeeding and sleepless nights, mothers experience a range of challenges during this time. Mother care after delivery focuses on supporting mothers through these challenges, promoting physical healing, emotional well-being, and self-care.

Focused antenatal care, which is evidence based, client-centered, goal directed care, provided by skilled health providers with emphasis on quality rather than frequency of visits, is an approach to be adopted globally. The approach accepts the view that every pregnant woman is at risk of complication and that all women should therefore; receive the same basic care and monitoring for complications (World Health Organization, 2005). Park (2009) views attitude as acquired characteristics of an individual which predisposes him or her to respond in some preferential manner. In the present context, an attitude refers to expectant mothers' affective feelings of likes and dislikes to focused antenatal care services. Thus, the pregnant women's personal experience to focused antenatal care services can be positive or negative. Ojo (2004) asserts that level of education, has a significant influence on the attitude of pregnant women to antenatal services. Pregnant women with basic education usually manifest positive attitude (Effiom, B.E., Mercy L.E.; Elizabeth G. A., 2021).

In spite of the abundant benefits of focused antenatal care in the maternity settings in University of Calabar Teaching Hospital, Calabar, Cross River State, most women who reside in the area and its environs do not still avail themselves of this inexpensive opportunity, hence the researcher sought to determine if the women have adequate knowledge concerning focused antenatal care, and their attitudes towards its services in the University of Calabar Teaching Hospital, Cross River State, Nigeria. Most maternal deaths are preventable as they are related to direct obstetrical complications such as hemorrhage, post-partum infection, obstructed labour and hypertensive disorders—all of which are treatable. Apart from medical causes, there are numerous interrelated socio-cultural factors which delay care seeking and contribute to maternal death. Maternal morbidity and mortality could be prevented if women and families recognize obstetric danger signs and promptly seek health care (Effiom, Bassey Ekeng; Janet peters and Babara Offiong Etim James2019). Thus, the need to mobilize when danger signs are recognized is apparent.

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The factors affecting birth preparedness and complication readiness among women attending antenatal clinic at UCTH, Calabar include: distance to health facility, lack of adequate support/assistance from family members, relative and friends, lack of financial support from my husbands, lack of awareness of the components of birth preparedness and complication readiness and poor inter-personal relationship between midwives and pregnant women. The frequency distribution and percentage counts were used to analyze the data. The study's findings revealed that doctors and nurses were the most accessible and used sources of nutrition information, whereas libraries were the least accessible and used sources of nutrition information. The study attributed the difficulties in information utilization to libraries' lack of funds and time. The study concluded by stating that the availability, accessibility, and utilization of nutrition information would result in a safe delivery, lowering maternal mortality.

In their study of nutrition education on pregnancy-specific nutrition knowledge and healthy dietary practice among pregnant women in Addis Abeba, Zelalem, Endeshaw, Ayenew, Shiferaw, and Yirgu (2017) discovered that health professionals were the most common source of nutrition information for pregnant women. Midwives and nurses were identified as the primary source of information for pregnant women.

Breast Feeding Information needed and resource Utilitalization

Breast care during pregnancy is an important part of preparing for breastfeeding. According to Jiang, Yang, Wen, Hunter, Gengsheng, and Qian (2012), a sizable proportion of parents require information on bottle feeding, breastfeeding routines, and expressing and storing milk. According to Victora, Bahl, Barros, Franca, Horton, Krasevec, Murch, Sankar, Walker, and Rollins (2016) and WHO (2015), expressing and storing milk, breastfeeding routine, and bottle feeding are important topics that pregnant women should be well informed about.

According to Shieh, McDaniel, and Ke (2009), pregnant women obtain breastfeeding information from sources such as health professionals, books/brochures, and family/friends. They identified barriers related to the information's availability through the media, computer access/use, a lack of family/friends, proximity to health centers, and, in turn, transportation. According to Danso (2014), pregnant women's primary source of exclusive breastfeeding information comes from health care professionals when they visit clinics, health centers, and hospitals. He also observed that, in addition to health care professionals, pregnant women learn about exclusive breastfeeding through reading, the media, school, friends, and other relatives.

Emotional Support and Mental Health of Mothers during Postnatal Period

In addition to physical recovery, the postnatal period can also take a toll on a mother's emotional well-being. Many new mothers experience a range of emotions, from overwhelming love and joy to feelings of anxiety, sadness, or isolation.

Mother care after delivery includes emotional support and mental health resources to help mothers navigate the ups and downs of new motherhood. Whether through individual counseling, support groups, or peer-to-peer support networks, mothers are encouraged to seek out the support they need to cope with the emotional challenges of the postnatal period.

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